

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	AT		11-17-99
O.I.P.E. CLASSIFIER		31	01/22/99
FORMALITY REVIEW	JB	10303	12-1

## INDEX OF CLAIMS

✓ Rejected  
 □ Allowed  
 - (Through numeral)... Canceled  
 + Restricted

N \_\_\_\_\_  
 I \_\_\_\_\_  
 A \_\_\_\_\_  
 O \_\_\_\_\_

Non-elected  
 Interference  
 Appeal  
 Objected

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
8	✓	✓	✓
9	✓	✓	✓
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50	✓	✓	✓

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions,  
staple additional sheet here.